U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

For Official STATE OF USE DO

# FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.					
1. File Number U - 13372	2. Fiscal Year Covered From:				
	1 / 1 / 2004 Through: 12 / 31 / 2004				
3. Name and address of person filing.	Name, file number, and address of labor organization.				
Name MARK H ELLIS	Name LONGSHOREMENS ASN AFL-CIO LU 3000				
	Labor Organization File Number 513-292				
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any				
Street 2700 S CLAIBORNE AVE	Street 2700 S CLAIBORNE AVE				
City NEW ORLEANS	City NEW ORLEANS				
State Louisiana · ZIP Code + 4 70125-3923	State Louisiana ZIP Code + 4 70125-3923				
Enter appropriate data below if, during the past fiscal year, you or your spo (except as specified in the exclusion)  A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization.	derived income or other economic benefit of				
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.				
Name					
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any					
Street	7.b. Amount.				
City	\$0				
State ZIP Code + 4					
Sign	nature				
15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany undersigned's knowledge and belief, true, correct, and complete. (See the se	ying documents), has been examined by the signatory and is, to the best of the				

Name of Person Filing MARK ELLIS	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary va substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is acti (2) any part of which consists of buying from or selling or leasing directly or included ing with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or directly to, or otherwise	
8. Name and address of Business (including trade name, if any).  Name INVESCO  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street 1360 PEACHTREE ST NE STE 100  City ATLANTA  State Georgia ZIP Code + 4 70130	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name NEW ORLEANS EMPLOYERS-II.A PWV&H FUNDS  Trade Name, if any:  P.O. Box, Bldg., Room No., if any	PWV&H INVESTMENT MANAGER	
Street 147 CARONDELET ST STE 300	11.b. Approximate dollar value of such dealing.	\$163,201
City NEW ORLEANS	12.a. Nature of interest held or income received.	
State Louisiana ZIP Code + 4 70130	MEAL, DECEMBER 1, 2004	
	12.b. Amount.	\$75
C. Received from any employer (other than an employer covered und or from any labor relations consultant to an employer any payment of money		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).		
Name		
Trade Name, if any:	10 mm	
P.O. Box, Bidg., Room No., if any		· control cont
Street		and a company of the
City		
State ZIP Code + 4		
13.b. Is the Business an Employer cr Consultant?	14.b. Amount of payment.	A (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)

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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name UBS GLOBAL ASSET MANAGEMENT INC	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bldg., Rcom No., if any	b. Trust	
Street ONE NORTH WACKER DR	c. Employer	
City CHICAGO		
State Illinois ZIP Code ÷ 4 60606		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name NEW ORLEANS EMPLOYERS-ILA PWV&H FUNDS	PWV&H INVESTMENT MANAGER	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 147 CARONDELET ST STE 300		
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City NEW ORLEANS		
State Louisiana ZIP Code + 4 70130	11.b. Approximate dollar value of such dealing.	\$144,452
	12.a. Nature of interest held or income received.	
	MEAL, DECEMBER 2, 2005	
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	B-C-400 Lineary	
	Total Control of the	
	The state of the s	
	12.b. Amount.	\$100

Name of Person Filing MARK ELLIS		File Number U-	

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name ROBEIN, URANN & LURYE	To Labor Organization	
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
	c. Employer	
Street 2540 SEVERN AVE		
City METAIRIE		
State Louisiana ZIP Code + 4 70002		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	· · · · · · · · · · · · · · · · · · ·
Name	UNION'S LAW FIRM	
Toda Nava if any		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	As the state of th	
Street	A Company of the Comp	
City	от при на при н	<u> </u>
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$36,000
	12.a. Nature of interest held or income received.	
	GREENS FEES CHARITY GOLF TOURNAMEN	T, JUNE 4, 2004
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	and the second s	
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	12.b. Amount.	\$60

Name of Person Filing MARK ELLIS	File	e Number U-	
Part B Contin	uation Page		
B. Held an interest in or derived income or economic benefit with monetary value <b>f</b> or leasing to, or otherwise dealing with the business of an employer whose employ (2) any part of which consists of buying from or selling or leasing directly or indirectly your labor organization is interested.	ees your labor organization repres	sents or is actively seekin	g to represent, or
8. Name and address of Business (including trade name, if any).	9. Business deals with:		
Name ROBEIN, URANN & LURYE	a. Labor Organizatio	on	
Trade Name, if any:	☐ b. Trust		
P.O. Box, Bldg., Room No., if any	X b. Hust		
Street 2540 SEVERN AVE	c. Employer		
City METAIRIE			
State Louisiana ZIP Code + 4 70002			***
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	······································	<u> </u>
Name NEW ORLEANS EMPLOYERS-ILA PWV&H FUNDS	PWV&H FUNDS CO-COUNSE	EL	
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			er i sammani ann ann ann ann ann ann ann ann ann
Street 147 CARONDELET ST STE 300			L L
City NEW ORLEANS			
State Louisiana ZIP Code + 4 70130	11.b. Approximate dollar value	of such dealing.	\$103,000
	12.a. Nature of interest held or	r income received.	
	GREENS FEES CHARTTY ( (PREVIOUSLY REPORTED)		JUNE 4, 2004
	Managalant der		

12.b. Amount.

\$60

Name of Person Filing MARK ELLI	IS		File Nu	umber U-	 · · · · · · · · · · · · · · · · · · ·
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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name ROBEIN, URANN & LURYE		
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 2540 SEVERN AVE	c. Employer	•
City METAIRIE		
State Louisiana ZIP Code + 4 70002		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name NEW ORLEANS EMPLOYERS-ILA ROYALTY FUND	ROYALTY FUND CO-COUNSEL	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 147 CARONDELET ST STE 300		
City NEW ORLEANS		
State Louisiana ZIP Code + 4 70130	11.b, Approximate dollar value of such dealing.	\$0
	12.a. Nature of interest held or income received.	
	GREENS FEE CHARITY GOLF TOURNAMENT, (PREVIOUSLY REPORTED)	JUNE 4, 2004
	The sandanian state of	
		age and a second a
	12.b. Amount.	\$60

Name of Person Filing MARK ELLIS	File Number U-

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name NEW ORLEANS EMPLOYERS-ILA ROYALTY FUND	a. Labor Organization	
Trade Name, if any:	a zazor organiconon	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 147 CARONDELET ST STE 300	c. Employer	
City NEW ORLEANS		
State Louisiana ZIP Code + 4 70130		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name (	UNION IS CO-SPONSOR OF BENEFIT PLA	NS
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
Ollect		•
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$2,757,818
	12.a. Nature of interest held or income received.	
	WAGES \$57,456 BENEFITS \$11,130 TRAVEL, ILA DISTRICT CONVENTION, J \$1,479	ULY 18-23, 2004
		To control to the con
	12 h. Amount	070.005
	12.b. Amount.	\$70,065

Name of Person Filing MARK I	ELLIS	File Number U-	

8. Name and address of Business (including trade name, if any).  Name NEW ORLEANS EMPLOYERS-ILA PWV&H FUNDS  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street 147 CARONDELET ST STE 300  City NEW ORLEANS	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer	
State Louisiana ZIP Code + 4 70130		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City	UNION IS CO-SPONSOR OF BENEFIT PLA	NS
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$5,853,019
	12.a. Nature of interest held or income received.	
	INTERNATIONAL FOUNDATION OF EMPLOY ANNUAL CONFERENCE REGISTRATION FEE 2004	
	12.b. Amount.	\$9.15